

MAR 10 2006

PTO/SB/97 (09-04)

Approved for use through 07/31/2006. OMB 0851-0031

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<b>From:</b>	Ivan M. Posey	<b>Date:</b>	March 9, 2006
<b>Direct Dial:</b>	(310) 712-8311	<b>Client/Matter #:</b>	10491-4

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PTO/SB/17 (12-04v2)

Approved for use through 07/31/2008. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<p>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <h2 style="text-align: center;">FEE TRANSMITTAL for FY 2005</h2>		<p style="text-align: center;">Complete if Known</p>	
<p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		Application Number	09/888,329
		Filing Date	June 22, 2001
		First Named Inventor	DAVISON, Jeff
		Examiner Name	BASEHOAR, Adam L.
		Art Unit	2178
<p><b>TOTAL AMOUNT OF PAYMENT</b></p>		<p>Attorney Docket No.</p>	<p>10491-4</p>
<p>(\$)</p>		<p>1080.00</p>	

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**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES**

Fee Description	Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

**Total Claims** 27 **Extra Claims** 7 **Fee (\$)** 25 **Fee Paid (\$)** 175

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims** 1 **Extra Claims** 0 **Fee (\$)** 0 **Fee Paid (\$)** 0

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	_____	_____	_____


\_\_\_\_\_ - 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount) \_\_\_\_\_

Other (e.g., late filing surcharge): \_\_\_\_\_

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	43,885	Telephone	(310) 712-8300
Name (Print/Type)	IVAN M. POSEY	Date	March 9, 2006		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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BROWN RAYMSMAN MILLSTEIN

MAR 09 2006

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PTO/SB/17 (12-04v2)

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<p><b>TOTAL AMOUNT OF PAYMENT</b> (\$ ) 1080.00</p>			

**METHOD OF PAYMENT (check all that apply)**

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- ☒ Deposit Account Deposit Account Number: 502811 Deposit Account Name: Brown Raysman
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments

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	Fee (\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	
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Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

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<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
27	-20 or HP= 7	x 25 = 175
HP = highest number of total claims paid for, if greater than 20.		
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
1	- 3 or HP= 0	x = 0
HP = highest number of independent claims paid for, if greater than 3.		

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Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) :

**Fees Paid (\$)**

**SUBMITTED BY**

Signature	Registration No. (Attorney/Agent) 43,885	Telephone (310) 712-8300
Name (Print/Type) IVAN M. POSEY	Date March 9, 2006	

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